

Required Vendor Ethics Disclosure Statement
Fallure to complete and return this form may result in delay or cancellation of the

County's Contra		Bld/Contract/PO #:				
Company Name: Equit	PMENT DNIBRAATD	WAL LTD Company Contact:	BRADI A	y LER	VER	
Contact Phone: 847	-479- 2an		RADO		J- Puteru	
			14	in	10 10) **	
		es the following written disclo				
more individual contracts w Division a written disclosure calendar year to any incumb	ith the county resulting in an a e of all political campaign cont pent county board member, co	reviously obtained a contract, change aggregate amount at or in excess of ributions made by such contractor, u punty board chairman, or countywide Il update such disclosure annually du	\$25,000, shall Inion, or vend e elected office	provide to Procur or within the curre ial whose office th	ement Services ent and previous se contract to be	
any change order or renewa includes owners, officers, m	al requiring approval by the co anagers, lobbyists, agents, cor	unty board. For purposes of this disc nsultants, bond counsel and underwi political action committees to which	osure require	ment, "contractor	or vendor"	
NONE (check here) - If no	contributions have been m					
Recipient	Donor	Description (e.g. cash, type kind services, etc.)	of item, in-	Amount/Value	Date Made	
					_	
NONE (check here) - If no contacts have been made Lobbylsts, Agents and Representatives and all individuals who as or will be having contact with county officers or employees in relation to the contract or bid		Is who are vees in Telephone	Email	Email		
Continuing disclosure is re If informa 30 days pr Annual dis	of the contract and possible d quired, and I agree to updat tion changes, within five (5) de rior to the optional renewal of sclosure for multi-year contract	osure requirements is subject to pen- isbarment from future county contra ethis disclosure form as follows: ays of change, or prior to county action any contract cts on the anniversary of said contract apt those issued by the county for ad	cts. on, whichever	is sooner	e not limited to,	
	r's ethics and procurement p	policies and ordinances are available		ujustments		
I hereby acknowledge that Authorized Signature	I have received, have read, ature on File	and understand these requiremen	ts.			
Printed Name	NAD CEY L	EN NOR				
Title	CO					
Date	15/doda					

Attach additional sheets if necessary. Sign each sheet and number each page. PAGE 1 OF 1 (total number of pages)